

NASA QUALITY SURVEILLANCE REPORT

REPORT NUMBER:		TEST POSITION / WORK AREA:	
PROJECT:	INITIATOR:	ORG. CODE:	DATE:

I. SURVEILLANCE CHECKLIST

YES	NO	N/A	
			1. Work is performed to approved documentation.
			2. Personnel have work authorizing documentation on site.
			3. Drawings/schematics are available as required on site.
			4. Personnel are properly trained/certified.
			5. Cleanliness is being maintained per applicable procedure.
			6. Equipment has evidence of proof test/calibration/certification.
			7. Items controlled as required. (i.e. Environmental, Shelf Life, ESD)
			8. Special processes are being performed per applicable requirements.
			9. Lockout - Tagout implemented as required.
			10. Compliance with procedures, inspection requirements.
			11. Compliance with FOD control procedures.

II. OBSERVATIONS OF NONCONFORMANCES OR UNSAFE CONDITIONS

EXAMPLES: LEAKS, LOOSE OR BROKEN BOLTS, TRIPPING HAZARDS, UN PROTECTED HARDWARE, PURGES NOT INSTALLED, DEFECTIVE GROUND STRAPS, PROPER EXPLOSIVE STORAGE AND HANDLING, PREVENTIVE MAINTENANCE REQUIRED, SECURED EQUIPMENT, AND HOUSEKEEPING.

III. ADDITIONAL COMMENTS

NOTE: DESCRIBE "ON THE SPOT CORRECTIVE ACTIONS", IF ANY.

NON-CONFORMANCE/CORRECTIVE ACTION:

DOCUMENT REQUIRED ☐ YES ☐ NO NUMBER: _____

IV. PERSONNEL NOTIFIED

NASA:	CONTRACTOR:
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